PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

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DECLARATION — Utility or Design Patent Application

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Robert J. Ireland									
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USA		503-324-1	503-324-1500			503-320-0		.0	
I hereby declare that all statem and belief are believed to be statements and the like so mad false statements may jeopardize	e true; and furt de are punishat	ther that t ble by fine	these state or imprise	tements onment	s we	ere made both, und	e with der 18 l	the know	wledge that willful false
NAME OF SOLE OR FIRST IN	VENTOR:			etition	has t	oeen file	d for thi	is unsiar	ned inventor
Given Name (first and middle [if any]) Donald					Family Name or Surname Studer				100 11.70.700
Inventor's 'Signature Oue N	254	_							Date 7 August 2003
Residence: City	State			Coun	Country			Citizenship	
Forest Grove	Oregon			USA	USA			USA	
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City	State			ZIP					Country
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NAME OF SECOND INVENTO	R:							en filed fo	or this unsigned inventor
Given Name (first and middle [if any])					Family Name or Surname				
Inventor's Signature									Date
Residence: City	State			Country		Citizenship			
Mailing Address									
City	State			ZIP				Country	
Additional inventors or a legal rep	presentative are bei	ing named on	n the s	Luppleme	ental st	heet(s) PT(D/SB/02A	or 02LR a	attached hereto.

PTO/SB/81 (05-03)

Approved for use through 11/30/2005. OMB 0651-0035
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number Filing Date** First Named Inventor POWER OF ATTORNEY OR AUTHORIZATION OF AGENT Art Unit **Examiner Name** Attorney Docket Number I hereby appoint: Place Customer Practitioners at Customer Number Number Bar Code Label here Practitioner(s) named below: Name Registration Number CORERT IRELAND as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Practitioners at Customer Number. Number Bar Code Label here OR Firm or Individual Name Address Address City State ANKS SZip 71 OG Country AZV Telephone 200 0720 l<u>am</u>the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Signature Date Telephone ZQ0. 503-645-3143 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. *Total of

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This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attorney Docket Number

DECLARATION	TUR UIILI	11 UK —		<u> </u>					
	SIGN	Firs	t Named Inventor	Donald Studer					
PATENT A	PPLICATIO	N	COMPLETE IF KNOWN						
(37 CF	FR 1.63)	Арр	lication Number						
Declaration Submitted OR With Initial	Declarati	ion Filin	g Date						
		ed after Initial Art I	Unit						
Filing	(37 CFR required	1.16 (e)) Exa	miner Name						
hereby declare that:									
Each inventor's residence, ma	ailing address, a	nd citizenship are as s	tated below next to th	eir name.					
believe the inventor(s) name	ed below to be th	e original and first inve	entor(s) of the subject	t matter which is clai	med and for				
Method for forming a		·							
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ha annaitiantia () () () ()		(Title of the Inve	ention)		•				
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is attached hereto									
OR									
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was filed on (MM/DD/Y	(as United States App	lication Number or f	PCT International				
Application Number		and was amended on	(MM/DD/YYYY)		(if applicable).				
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acknowledge the duty to d	isclose informati	ion which is material	to patentability as d	efined in 37 CER 1	56 including for				
continuation-in-part applicatio	ns, material info	rmation which became	e available between	the filing date of the	e prior application				
and the national or PCT interr					Ai/-> f				
I hereby claim foreign priority inventor's or plant breeder's i									
country other than the United	States of Ameri	ca, listed below and ha	ave also identified be	low, by checking the	e box, any foreign				
application for patent, invento before that of the application (s), or any PCT intern	ational application h	aving a filing date				
Prior Foreign Application	1	Foreign Filing Da	te Priori	ty Certified	Copy Attached?				
Number(s)	Country	(MM/DD/YYYY)	Not Clai		No				
Additional foreign applica	tion numbers are	e listed on a suppleme	ntal priority data shee	et PTO/SB/02B attac	ched hereto.				

[Page 1 of 2]

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SMALL ENTITY DECLARATION

- I am an individual inventor.
- I have full ownership of this invention.

• I claim small entity status under 37 CFR 1.27.

Donald Studer

Sincerely,

Date

Inventor